



eCQM Design Group

March 14, 2017

10:00 am – 11:30 am



CEDARBRIDGE
GROUP

DRAFT Agenda

Welcome / Roll Call / Comments on 3/7/17 Summary	Karen Bell, MD	10:00 AM
Meeting Objectives	Karen Bell, MD	10:05 AM
Environmental Scan Review	Michael Matthews	10:10 AM
Clinical Data Types and Sources: Discussion	Karen Bell, MD	10:25 AM
Validate Priority Use Case Categories	Karen Bell, MD	10:40 AM
Validate Progress Report	Karen Bell, MD	10:50 AM
Consider Details Around the Components of a Statewide eCQM System	Karen Bell, MD	11:05 AM
Meeting Wrap-up and Next Steps	Karen Bell, MD	11:25 AM

Meeting Objectives?

- Review preliminary environmental scan themes
- Validate priority use case categories
- Validate progress report
- Consider details around the components of a statewide eCQM system

Review Preliminary Environmental Scan Themes

Environmental Scan Review

Current State and Desired Future State

46 Interviews Completed | 176 Individuals included

Snapshot of Completed Interviews

Hospitals and Health Systems

Physicians and Providers

Health Plans and Payers

Long Term Post-Acute Care

Behavioral Health

Consumers and Community Organizations

State Agencies / Programs and Legislators

Other (e.g., pharmacies, labs, radiology)

*The following themes are **preliminary findings** and are subject to further data collection and analysis as the stakeholder engagement process continues.*

Preliminary Themes

DRAFT For Discussion Purposes Only

Technology Themes

- Many interviewees reported they had to **make do** without a statewide HIE; their needs are evolving from 3-5 years ago
- **Old-fashioned way** (e.g., fax, phone) still widely utilized and necessary
- **DIRECT** messaging in use, but not consistently or in standardized manner
- **Public health reporting** is widely regarded as high priority need across the state
- **Clinical workflow** is a top consideration for providers; “smart” care summaries would be helpful
- **Encounter alerts** are valuable; concerns about functionality and potential for duplication of effort in the state
- **A statewide eCQM solution** is viewed positively if measures and reporting can be harmonized and standardized
- **ACOs** emerging as important part of healthcare ecosystem in CT, with implications for both HIE and value-based care

Relationship Themes

- **Community organizations** are critical to coordinating systems of care and to addressing health disparities;
- Some **key stakeholders feel their needs have been neglected** (e.g., behavioral health and long-term/post-acute care)
- **Consumer engagement** is critical for value-based care and HIE; devices, patient portals, etc., along with privacy, security and confidentiality
- Patients should be viewed as the “**North Star**” to guide decisions
- **Trust and confidence in planning and implementing technology** are viewed as critical success factors

**Validate Value Propositions, Priority Use
Case Categories, and Conceptual Model**

eCQM Design Group Workflow

Validate Stakeholders

Validate Value Propositions

Roadmap a Quality Measurement System

Identify Clinical Measure Data Requirements and Sources

Validate Components of an eCQM System

Recommendations for Business and Functional Requirements

Recommendations for Future Planning Needs (Governance, Sustainability, Other)

Proposed Timeline?

Milestones/Deliverables	Planned Dates
Validate value proposition summary Validate clinical electronic data sources necessary for clinical quality measures Review components of a statewide eCQM system and priority use case categories	3/07/17
Review preliminary themes from Environmental Scan Validate priority use case categories for statewide eCQM system Validate progress report to 3/16 Health IT Advisory Council Consider details around the components of a statewide eCQM system	3/14/17
Consider draft business and functional requirements for a statewide eCQM system	3/21/17
Review synthesis of input and validate recommendations for business and functional requirements for a statewide eCQM system	3/28/17
Consider governance, sustainability, and additional component areas requiring ongoing stakeholder planning for a statewide eCQM system	4/04/17
Review synthesis of input and validate recommendations for an ongoing planning approach for inclusion in the recommendations to Health IT Advisory Council Review and finalize the Design Group's recommendations for a statewide eCQM system	4/11/17
Present Final Report and Recommendations to Health IT Advisory Council	4/20/17

Central Value Proposition

A statewide system for electronic clinical quality measurement will enable providers and encourage payers to more efficiently participate in successful value-based payment models through

- Access to comprehensive data from every provider on a given patient
- A trusted third party conducting data management and analytics
- Administrative efficiency

Over time, a robust healthcare delivery system of high-performing organizations will thrive in a value-based payment environment, and will help Connecticut achieve the quadruple aim of better health, better care, lower costs, and improved work life of healthcare providers.

Validated: Summary Value Statements for a Quality Measurement System

The value of a statewide system CQM beyond that of the current fragmented provider/payer focused approach can be found in:

- **A patient-centered focus** where composite measures reflect the care that has been provided from all sources where a patient has received it
- The potential for **decreased administrative burden** for all stakeholders
- Data collection, management, and analysis by a **trusted third party**

The value of a statewide system may not be fully realized until:

- Clinical data is integrated with other e-health data sources
- Milestones along the implementation timeline are reached for all stakeholders
- Clarity is reached on the level of value that can be attributed to each stakeholder

Validate: Value Propositions by Stakeholder groups (1)

Value Propositions and Examples	Potential Recipients of Value
Value in support of Patient Care	
<ul style="list-style-type: none"> Comprehensive data and measures to support quality improvement activities by identifying opportunities 	Payers, ACOs, hospitals, and clinician practices
<ul style="list-style-type: none"> Comprehensive data and measures to improve patient care and care coordination activities by identifying gaps in care 	Patients and families, employers, providers, ACOs, hospitals
<ul style="list-style-type: none"> Comprehensive data and measures support integration of care between BH and other parts of delivery system by evaluating patient use of services 	Patients and families, BH health providers, other types of providers
Value in support of Value Based Care	
<ul style="list-style-type: none"> Comprehensive data and measures for use in value-based contracting to adjudicate payments; weight quality components in various contracts 	Payers, purchasers
<ul style="list-style-type: none"> Comprehensive data and measures to maximize incentive payments through more accurate health risk assessments; identified care out of contracted system 	Providers participating in Value Based Contracts

Validate: Value Propositions by Stakeholder groups (2)

Value Propositions and Examples	Potential Recipients of Value
Value in support of Public Health	
<ul style="list-style-type: none"> Comprehensive data and measures to support more transparency of healthcare costs to payers and consumers and quality performance 	Payers, purchasers, consumers, policymakers
<ul style="list-style-type: none"> Comprehensive data and measures to inform community needs assessments and resource planning by evaluation of various subpopulations 	Governments (federal, state, local), policymakers, philanthropies, community organizations
<ul style="list-style-type: none"> Comprehensive data and measures to assess equity in health care across the delivery system and diverse populations 	Governments (federal, state, local), policymakers, philanthropies, community organizations

Validate: Value Propositions by Stakeholder groups (3)

Value Propositions and Examples	Potential Recipients of Value
Value to multiple stakeholders to meet diverse needs	
<ul style="list-style-type: none">Increased efficiency and decreased administrative burden by streamlining reporting of quality measures to a central source	All organizations reporting to quality measurement programs
<ul style="list-style-type: none">Support for research and program evaluation by enhancing ability to identify cohorts and outcomes.	Payers, purchasers, ACOs, hospitals and provider practices, governments (federal, state, local), policymakers, philanthropies, community organizations

Validate Priority Use Case Categories (examples for discussion)

Use Case Category	Administrative Function
Quality Improvement	• Accurately identify cohorts
	• Identify opportunities for new QI programs
	• Assess care integration between BH and PH
Administrative Efficiencies	• Application of exclusion criteria
	• Calculation of incentive payments
Research	• Program evaluation • Cohort identification
Public Health	• Quality and price transparency • Identification of health inequities • Community health assessments

**Validate Progress Report to 3/16 Health
IT Council Meeting**

eCQM Design Group Workflow

Validate Stakeholders

Validate Value Propositions

Roadmap a Quality Measurement System

Identify Clinical Measure Data Requirements and Sources

Validate Components of an eCQM System

Recommendations for Business and Functional Requirements

Recommendations for Future Planning Needs (Governance, Sustainability, Other)

Consider Details Around the Components
of a Statewide eCQM System

ONC Health IT-enabled Quality Measurement

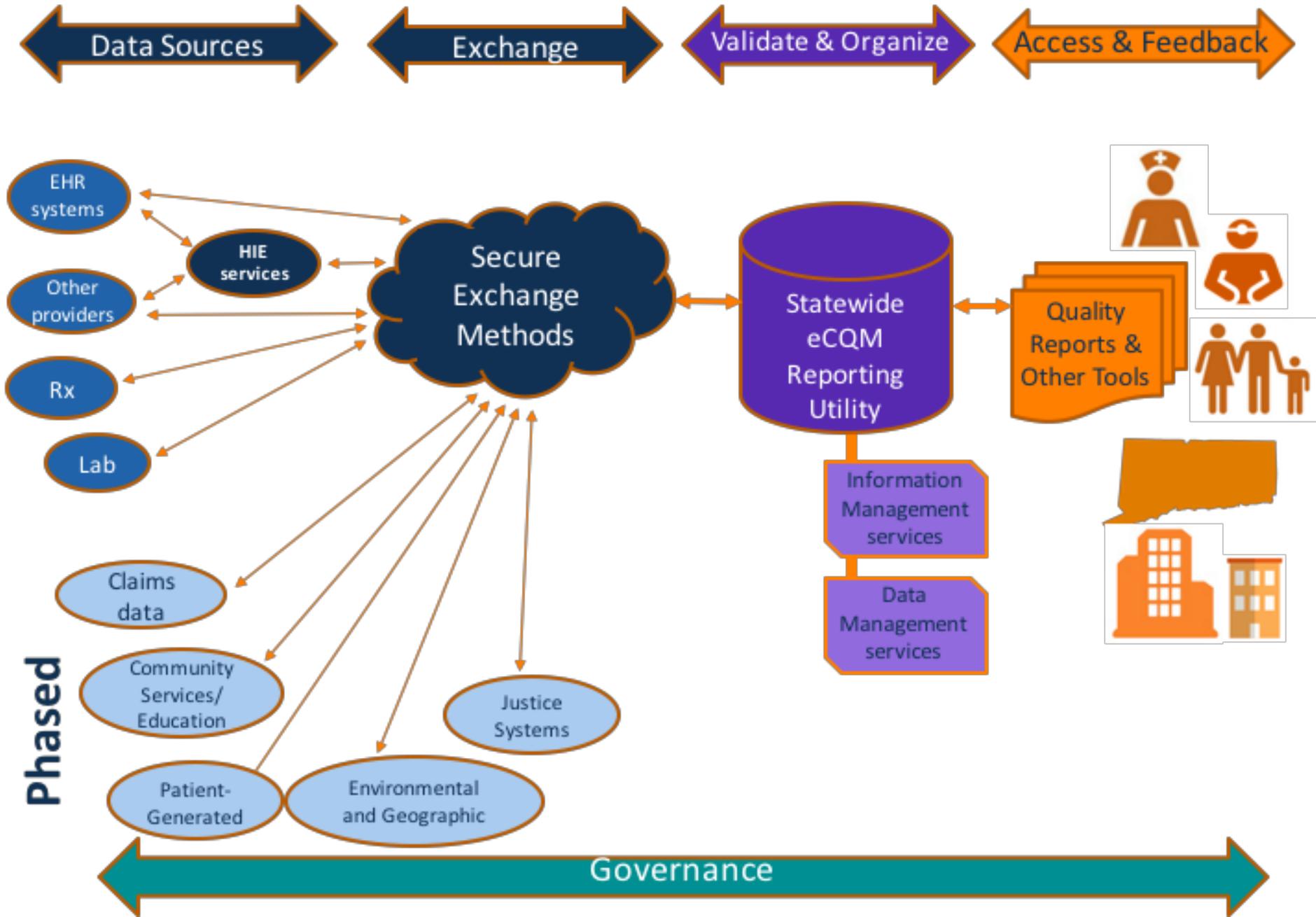
Aug 2016 SIM Technical Assistance Convening



Infrastructure that can support patient level data extraction and centralized quality measurement

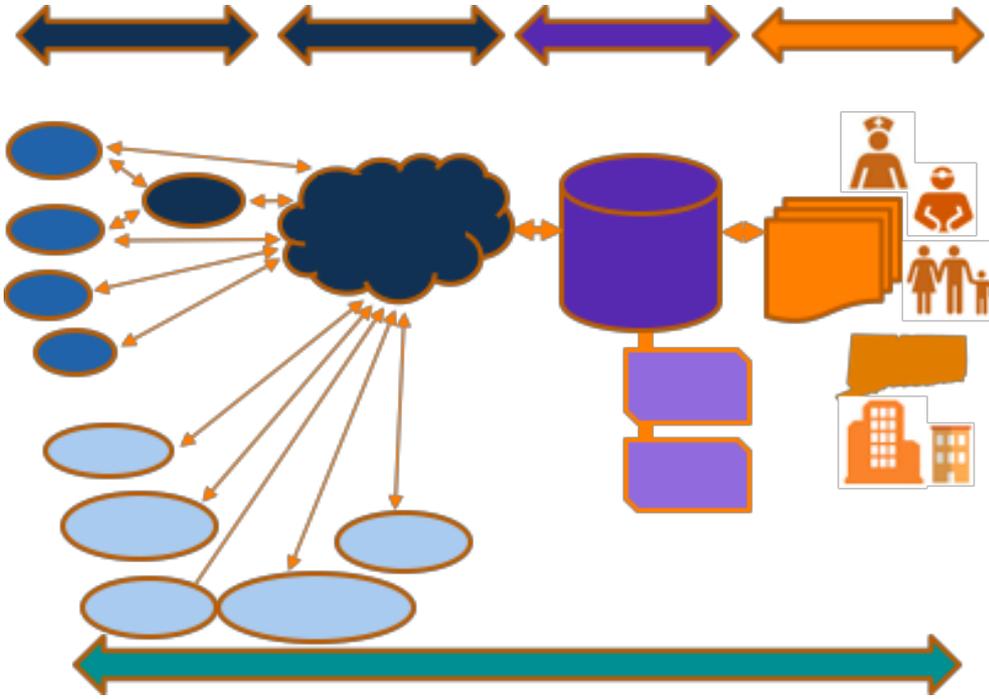
Foundation for a 'Healthy' Health IT Stack

Conceptual Model of Statewide System



Data Quality,
Provenance, &
Stewardship

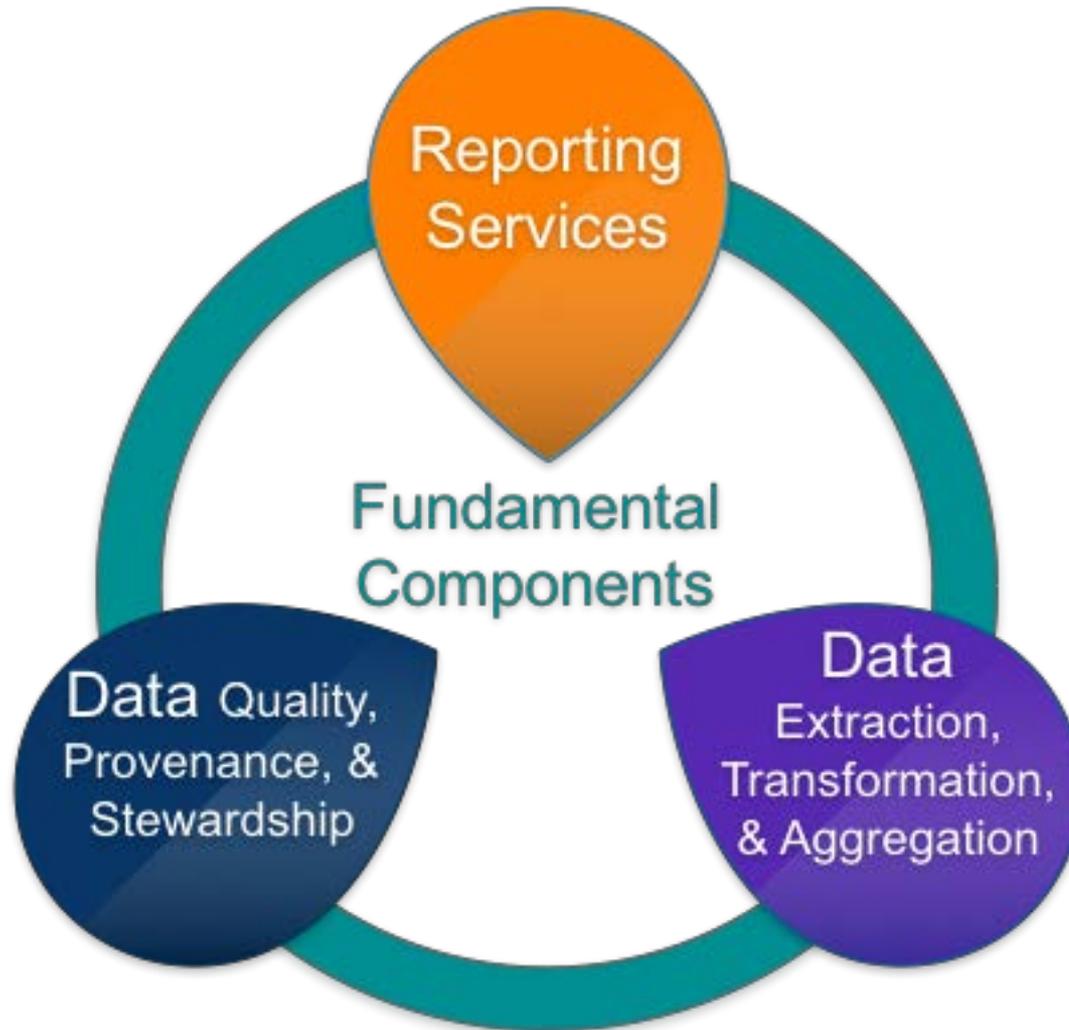
Data Extraction,
Transformation, &
Aggregation



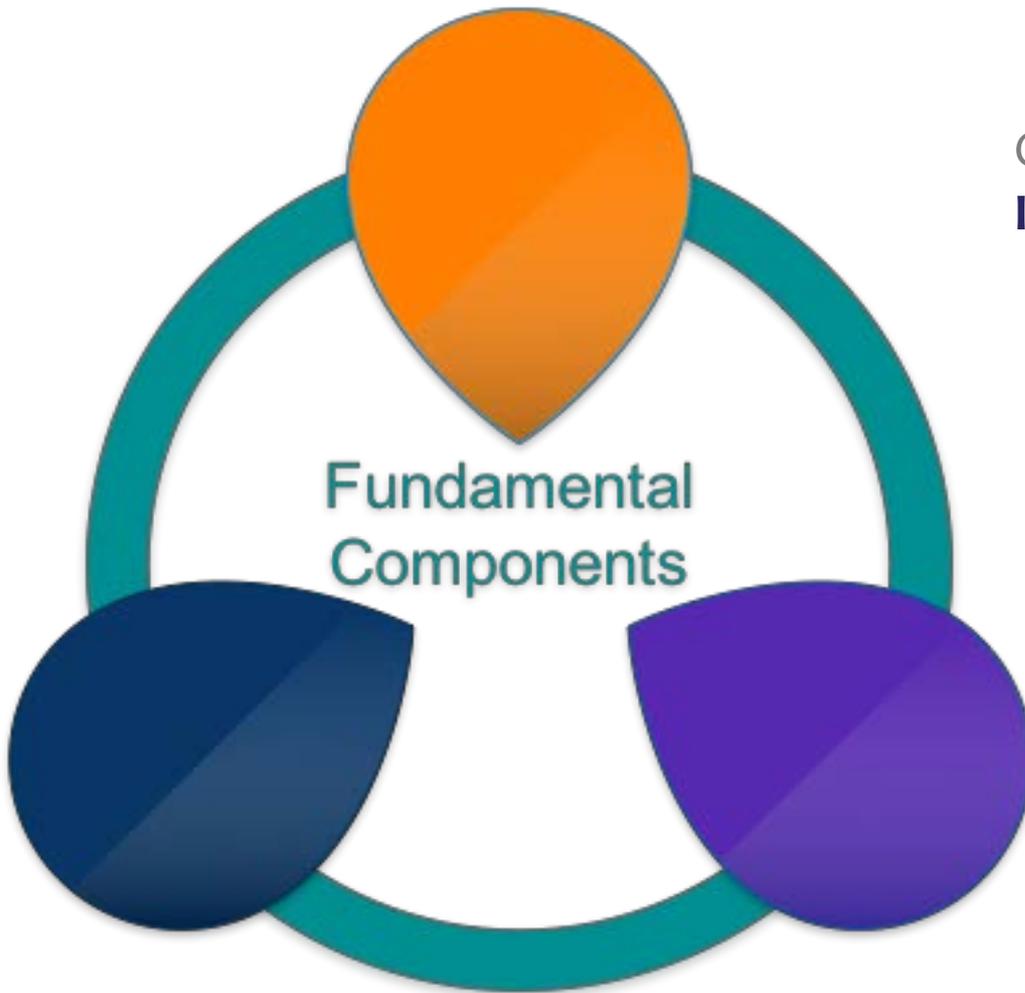
Reporting
Services

Fundamental
Components

Critical Components of an eCQM System



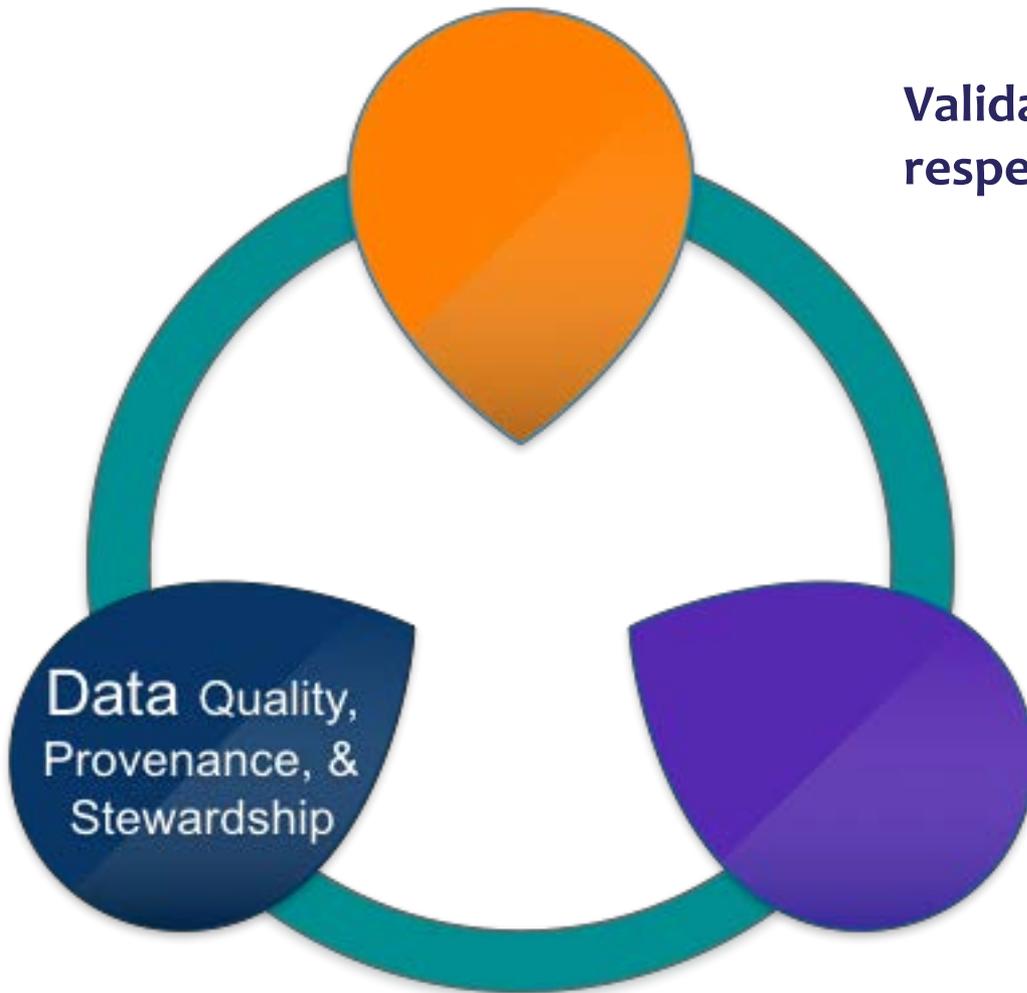
Critical Components of an eCQM System



Out of scope for CQM Design Group
In scope for CQM Design Group

- Organizational governance (business operations, policy & legal, accountable oversight & rules of engagement)
- Operations
- Sustainable financial model
- **Locus of data aggregation (locally, intermediaries, and central)**
- **Technical assistance framework**

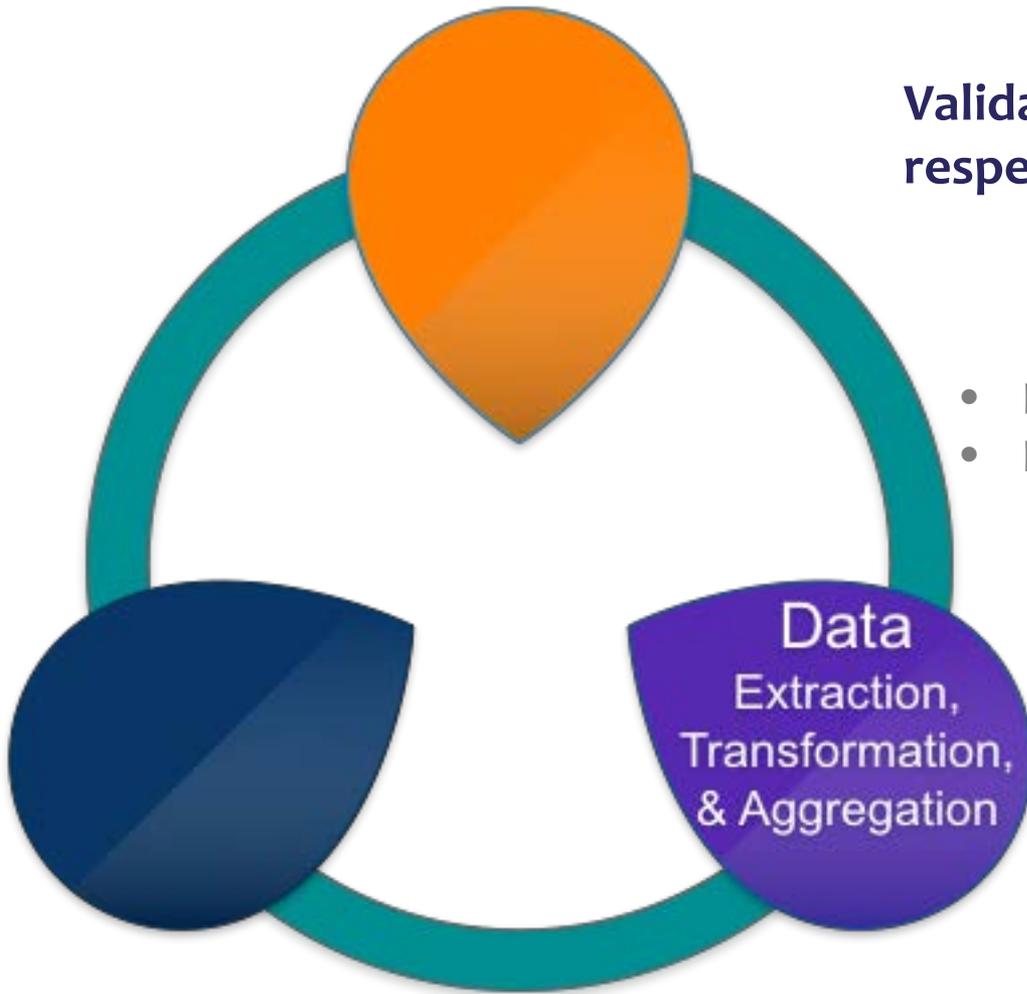
Critical Components of an eCQM System



Validate out of scope components with respect to CQMs.

- System Performance and Auditing Capabilities
- Directories (Master Person Index, Master Provider Directory, Authorized User Directory)
- Attribution (providers, organizations, and patients)
- HIPAA requirements and consent framework
- Privacy & Security standards
- Quality controls
- Data exchange (Direct, query/retrieve, HL7 v2.x)
- Content standards (claims, clinical, etc.)

Critical Components of an eCQM System



Validate out of scope components with respect to CQMs.

- Data normalization, integration, analysis
- Risk adjustment

Critical Components of an eCQM System



- **Analytical Tools**
- **Notification** (bidirectional secure communication about operations and content of the system)
- **Consumer Tools** (e.g., scorecard of providers, track own blood pressure)
- **Provider Tools**
- **Feedback methods of aggregate and individual quality reports**

Next Steps

- Functional requirements



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